



**FRESENIUS  
KIDNEY CARE**

**Fresenius Kidney Care**

3500 Lacey Road, Downers Grove, IL 60515  
T 630-960-6807 F 630-960-6812  
Email: [lori.wright@fmc-na.com](mailto:lori.wright@fmc-na.com)

February 7, 2019

**RECEIVED**

FEB 8 2019

**HEALTH FACILITIES &  
SERVICES REVIEW BOARD**

Ms. Courtney Avery  
Administrator  
Illinois Health Facilities & Services Review Board  
525 West Jefferson, 2<sup>nd</sup> Floor  
Springfield, IL 62761

**Re: Project #17-024, Fresenius Kidney Care Springfield East**  
**Permit Holder:** Fresenius Medical Care Springfield East, LLC, and Fresenius Medical Care Holdings, Inc.  
**Permit Amount:** \$2,914,837

Dear Ms. Avery:

Fresenius Medical Care Springfield East, LLC is seeking a permit renewal for Fresenius Kidney Care Springfield East. The \$500 renewal fee will be sent via overnight delivery to arrive February 8, 2018. There has been no change to the size and scope of this project since the alteration granted on June 27, 2018. This report summarizes the status of the project.

Sincerely,

Lori Wright  
Fresenius Medical Care  
Senior CON Specialist



January 22, 2019

**Request for Permit Renewal Section 1130.750**

**Project #17-024, Fresenius Kidney Care Springfield East**

**Permit Holder: Fresenius Medical Care Springfield East, LLC, and Fresenius Medical Care Holdings, Inc.**

- 1. The requested completion date: *The requested completion date is October 31, 2019.***
- 2. a status report on the project detailing what percent has been completed and a summary of project components yet to be finished and the amount of funds expended on the project date**

This project is for the establishment of the 9-station Fresenius Kidney Care Springfield East ESRD facility to be located at 1800 E. Washington Street, Springfield. There was an address change by the post office and the new address is 140 S. Martin Luther King Drive, Springfield. This is an address change only and not a site change. The facility is located on the corner of Washington Street and Martin Luther King Drive with the entrance closer to the latter.

The project was obligated with the execution of the lease for premises on February 12, 2018. On June 27, 2018 an alteration request was approved increasing project costs to \$2,914,837. Construction is complete, and the facility began operations on January 21, 2019.

- 3. a statement as to the reasons why the project has not been completed**

The construction of this facility experienced only a slight delay when it was determined that additional funds would be required for unforeseen expenses as well as the increased costs of steel due to government tariffs. After the permit alteration was granted construction resumed and the facility began operations on January 21, 2019. The project is 99% complete and is simply waiting on Medicare certification to be complete. This is expected prior to October 31, 2019.



4. evidence of financial commitment to fund the project

Sources and Uses of Funds

Total committed for Project

Line Item	Allowance/CON	Realized Costs
Modernization	1,368,337	1,124,939
Contingencies	131,177	0
Architectural/Engineering	130,000	89,537
Movable & Other Equipment	279,000	251,592
FMV of Leased Space & Equipment	1,006,123	1,006,123
<b>Total Project Costs</b>	<b>\$2,914,837</b>	
<b>Realized Total Project Costs To Date</b>		<b>\$2,472,191</b>

5. Anticipated final cost of the project: *Final cost will be within the permit amount of \$2,914,837.*



## FRESENIUS KIDNEY CARE

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Fresenius Medical Care Springfield East, LLC

In accordance with Section 1130.740 part c, of the Illinois Health Facilities & Services Review Board rules for renewal of a permit;

I do hereby certify that the financial resources to fund the project are available and that the project's cost, scope, design, square footage, number of stations are compliant with that which the State Board has approved.

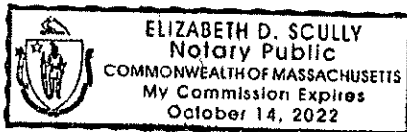
By: *[Signature]*  
ITS: Bryan Mello  
Assistant Treasurer

Notarization:

Subscribed and sworn to before me

This 6<sup>th</sup> day of February 2019

Seal





# FRESENIUS KIDNEY CARE

Fresenius Medical Care Holdings, Inc.

In accordance with Section 1130.740 part c, of the Illinois Health Facilities & Services Review Board rules for renewal of a permit;

I do hereby certify that the financial resources to fund the project are available and that the project's cost, scope, design, square footage, number of stations are compliant with that which the State Board has approved.

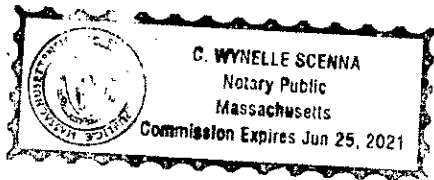
By:

Bryan Mello  
Assistant Treasurer

ITS:

Notarization: C Wynelle Scenna  
Subscribed and sworn to before me  
This 22 day of Feb, 2019

Seal



## APPLICATION AND CERTIFICATE FOR PAYMENT

AIA DOCUMENT G702

(Instructions on reverse side)

PAGE 1 OF 1

<b>TO (OWNER):</b> Fresenius Medical Care Springfield East, LLC c/o Fresenius Medical Care NA 1909 Tyler St., 8th Fl Hollywood, FL 33020	<b>PROJECT:</b> FKC - Springfield East 140 S. Martin Luther King Jr. Drive Springfield, IL 62703 100643-1-DN-W-BO-2017	<b>APPLICATION NO:</b> 4 <b>APPLICATION DATE:</b> 10/31/2018 <b>PERIOD FROM:</b> 10/1/2018 <b>PERIOD TO:</b> 10/31/2018	<b>Distribution to:</b> <input type="checkbox"/> OWNER <input type="checkbox"/> ARCHITECT <input type="checkbox"/> CONTRACTOR
<b>FROM (CONTRACTOR):</b> Peoria Metro Construction 1925 S. Darst Peoria, IL 61601	<b>VIA (ARCHITECT):</b> C. Kidd & Associates, LLC N48W16550 Lisbon Road Menomonee Falls, WI 53051	<b>ARCHITECT'S</b> <b>PROJECT NO:</b> 17051-01 <b>PMC PROJECT NO:</b> 18075FRES <b>CONTRACT DATE:</b>	

## CONTRACTOR'S APPLICATION FOR PAYMENT

CHANGE ORDER SUMMARY		ADDITIONS	DEDUCTIONS
Change Orders approved in previous months by Owner			
TOTAL			(\$6,708)
Approved this Month			
Number	Date Approved		
3	10/15/2018	\$7,511	
TOTALS		\$7,511	(\$6,708.12)
Net change by Change Orders			\$802.53

The undersigned Contractor certifies that to the best of the Contractor's knowledge, information and belief the Work covered by this Application for Payment has been completed in accordance with the Contract Documents, that all amounts have been paid by the Contractor for Work for which previous Certificates for Payment were issued and payments received from the Owner, and that current payment shown herein is now due.

CONTRACTOR: Peoria Metro Construction

By:

Date:

10-1-18

## ARCHITECT'S CERTIFICATE FOR PAYMENT

In accordance with the Contract Documents, based on on-site observations and the data comprising the above application, the Architect certifies to the Owner that to the best of the Architect's knowledge, information and belief the Work has progressed as indicated, the quality of the Work is in accordance with the Contract Documents, and the Contractor is entitled to payment of the AMOUNT CERTIFIED.

Application is made for Payment, as shown below, in connection with the Contract.

Continuation Sheet, AIA Document G703, is attached.

1. ORIGINAL CONTRACT SUM.....	\$	1,050,000.00
2. Net change by Change Order.....	\$	802.53
3. CONTRACT SUM TO DATE (Line 1+2).....	\$	1,050,802.53
4. TOTAL COMPLETED & STORED TO DATE.....	\$	794,769.66
(Column G on G703)		
5. RETAINAGE:		
a. 10% of Completed Work.....	\$	79,477.00
(Column D + E on G703)		
b. 10% of Stored Material.....	\$	0.00
(Column F on G703)		
Total Retainage (Line 5a + 5b or		
Total in Column I of G703).....		
6. TOTAL EARNED LESS RETAINAGE.....	\$	715,292.66
(Line 4 less Line 5 Total)		
7. LESS PREVIOUS CERTIFICATES FOR		
PAYMENT (Line 6 from prior Certificate).....		
8. CURRENT PAYMENT DUE.....	\$	381,693.32
9. BALANCE TO FINISH, PLUS RETAINAGE.....	\$	333,599.34
(Line 3 less Line 6)		

State of: Illinois

Subscribed and sworn to before me this 1st

Notary Public: Susan L. Cox

My Commission expires:

11/20/2021

County of: Peoria

day of: NOV 26

Notary Public - State of Illinois

My Commission Expires Nov 20, 2021

AMOUNT CERTIFIED..... \$ 333,599.34

(Attach explanation if amount certified differs from the amount applied for.)

ARCHITECT:

By:

Date:

This Certificate is not negotiable. The AMOUNT CERTIFIED is payable only to the Contractor named herein. Issuance, payment and acceptance of payment are without prejudice to any rights of the Owner or Contractor under this Contract.

# APPLICATION AND CERTIFICATE FOR PAYMENT

AIA DOCUMENT G702

Page 1 of

TO (OWNER): Fresenius Medical Care PROJECT: Springfield IL Springfield East FKC 100643

APPLICATION NO: 2

Distribution to:

FROM (CONTR.) Cohen Architectural VIA (ARCHITECT):

PERIOD TO: October 2018

OWNER:

Woodworking

CONTRACTOR'S

ARCHITECT

CONTRACT FOR: Millwork & Installation

PROJECT NO: 100643-1-DN-W-BO-17-004

CONTRACTOR

CONTRACT DATE:

## CONTRACTOR'S APPLICATION FOR PAYMENT

CHANGE ORDER SUMMARY		ADDITIONS	DEDUCTIONS
Change Orders approved in previous months by Owner			
TOTAL			
Approved this month			
Number	Date Approved		
TOTALS		0	0
Net change by Change Orders		0	

The undersigned Subcontractor certifies that to the best of Subcontractor's knowledge, information and belief the Work covered by this Application for Payment has been completed in accordance with the Contract Documents, that all amounts have been paid by the Contractor for Work for which previous Certificates for Payment were issued and payments received from the Owner, and that current payment shown herein is now due.

CONTRACTOR:

By:

Date: 10-8-18  
DAVID BEADLES  
Notary Public - Notary Seal  
STATE OF MISSOURI  
Phelps County  
My Commission Expires: March 29, 2021  
Commission #17298584

Application is made for Payment, as shown below, in connection with the Contract. Continuation Sheet, AIA Document G703, is attached.

1. ORIGINAL CONTRACT SUM	\$ 74,136.00
2. Net change by Change Orders	\$ -
3. CONTRACT SUM TO DATE (Line 1 + 2)	\$ 74,136.00
4. TOTAL COMPLETED & STORED TO DATE (Column G on G703)	\$ 74,136.00
5. RETAINAGE:	
a. 10 % of Completed Work (Columns D + E on G703)	\$ 7,413.60
b. 100 % of Stored Material (Column F on G703)	
Total Retainage (Line 5a + 5b or Total in Column I of G703)	\$ 7,413.60
6. TOTAL EARNED LESS RETAINAGE (Line 4 less Line 5 Total)	\$ 66,722.40
7. LESS PREVIOUS CERTIFICATES FOR PAYMENT (Line 6 from prior Certificate)	\$ 18,540.00
8. CURRENT PAYMENT DUE	\$ 48,182.40
9. BALANCE TO FINISH, INCLUDING RETAINAGE (Line 3 less Line 6)	\$ 7,413.60

State of: Missouri County of: Phelps  
Subscribed and sworn to before me this 8th day of October 2018  
Notary Public: DMB  
My Commission expires: 3-29-21

## ARCHITECT'S CERTIFICATE FOR PAYMENT

In accordance with the contract Documents, based on on-site observations and the data comprising the above application, the Architect certifies to the Owner that to the best of the Architect's knowledge, information and belief the Work has progressed as indicated the quality of the Work is in accordance with the Contract Documents, and the Contractor is entitled to payment of the AMOUNT CERTIFIED.

AMOUNT CERTIFIED  
(Attach explanation if amount certified differs from the amount applied for.)  
ARCHITECT:

By:

Date:

This Certificate is not negotiable. The AMOUNT CERTIFIED is payable only to the Contractor named herein. Issuance, payment and acceptance of payment are without prejudice to any rights of the Owner or Contractor under this Contract.

NOTICE: PROPERTY OWNERS IMPORTANT INFORMATION  
CONCERNING MECHANICS LIENS ON REVERSE SIDE.

TERESA BARNES

OCT 10 18

RECS-North Cent.  
RECEIVED